



winterreadymontana

Inclusive Service Project Mini-Grants

Issued: November 3, 2010

Due: November 17, 2010

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PROJECT INFORMATION

ServeMontana - The Governor's Office of Community Service encourages citizens of all ages and backgrounds to engage in service, involve youth in the life and work of communities, and work to expand volunteer opportunities for all Montanans. Key to our efforts is ensuring the full involvement of individuals with disabilities in their communities. To learn more about disability inclusion in Montana visit: <http://serve.mt.gov/>

Inclusive Service Project - Mini-Grants provide funds to implement one-day or ongoing Winter Ready inclusive service projects to engage Montanans in their local communities and winter preparedness. Eligible entities include: public or private nonprofit organizations, community and faith-based organizations, state and local education institutions, Indian tribes, state, city, counties, and local governments. Projects should be inclusive in all aspects including assisting in project development, engaging in skill development, and building a strong service foundation in communities across Montana.

Total Funding Available - \$30,000 to award a maximum of 30 Mini-Grants. Winter Ready Inclusive Service Projects must be completed between December 1st 2010 and January 17th 2011 - Martin Luther King, Jr. Day of Service <http://www.mlkday.gov/>.

Partners - ServeMontana is pleased to offer this opportunity in conjunction with the Montana Commission on Community Service and Montana Citizen Corps.

Application - To apply please complete the full application (Attachments A, B, C). Please limit your application to five pages (additional pages will not be read).

Application Due Date - Wednesday, November 17, 2010 at 5:00 pm MST

Return the attached application form to:

Governor's Office of Community Service

PO Box 200801

Helena, MT 59620-0801

P: 406-444-9077

E: serve@mt.gov

Emailed, delivered, and mailed submissions are acceptable (email preferred)

The Governor's Office of Community Service will contact you confirming receipt of your application. If you do not hear from us within 24 hours please call at 406-444-9077 and confirm your letter of intent and self-assessment arrived.

Allowable use of funds: Funds are limited to direct program needs. Allowable uses of funds are project materials, transportation for participants, food, beverages, and venue or material rentals. Funds may not be used to cover personnel costs.

Winter Ready Focus Area: The Governor's Office of Community Service Winter Ready initiative encourages all Montanans to be prepared for winter and to help their neighbors and those in need. http://serve.mt.gov/?page_id=2968

- Promote Warm Hearts Warm Homes Initiative
 - Weatherization, Energy Savings, Keeping Your Family and Neighbors Warm
- Promote First Lady Nancy Schweitzer's One Warm Coat Drive
 - Coat Drive
- Provide Winter Preparedness Information to Citizens
 - Winter Driving Tips - Tips for Fighting the Flu
- Promote Community Service and National Service in Winter Preparedness
 - Canned Food Drives
- Engage Citizens in Service – Neighbors Helping Neighbors in Winter

Project Criteria: Projects will be selected for Mini-Grants based on the following criteria:

- Number of Volunteers Engaged
- Cost-effectiveness
- Proposed Impact of Inclusive Service Project
- Disability Inclusion in the Planning, Design, and Delivery
- Collaborative Approach in the Planning, Design, and Delivery
- Demonstrated Ability to Successfully Administer an Inclusive Service Project
- Addressing Rural, Underserved, or Areas of Extreme Poverty

ServeMontana reserves the right to award partial funding based upon the number and quality of applications.

Reporting: Projects chosen for an award will be required to provide Final Project Report containing the following information:

- ✓ Service Data
- ✓ Number of Volunteers Engaged
- ✓ Project Results
- ✓ Video and/or Photo's with Media Release (form available at serve.mt.gov)
- ✓ Certification of expended funds (spent only within the allowable use of funds)
- ✓ Certification all project activities/terms listed in the application were met

Funding: Projects awarded an Inclusive Service Project Mini-Grant by the Governor's Office of Community Service will receive half of the awarded funds upon completion of Inclusive Service Project Mini-Grant Agreement and the remaining half upon execution of the Final Project Report.

APPLICATION

A. Basic Applicant Information

APPLICANT ORGANIZATION

1. Organization (legal applicant name):

2. Organization Mission:

3. Organization Type: (Select all that apply: For-profit entities are ineligible as are organizations not benefitting Montanans)

☐ Faith-based

☐ Non-profit

☐ Tribal Council

☐ Education

☐ Government

☐ Other: _____

4. Street Address/City/State/Zip:

5. Federal Tax Identification Number (Employer ID Number - EIN):

PROJECT MANAGEMENT

6. Project Leader:

7. Street Address/City/State/Zip:

8. Email:

9. Phone:

AUTHORIZED AGENT TO SIGN CONTRACTS

NAME & TITLE (print): _____

SIGNATURE & DATE: _____

B. Project Details and Narrative

1. Project Title:

2. Inclusive Service Project Location(s) (Complete Address):

3. Inclusive Service Project Date(s) and Time:

4. How many people will be involved in the planning of this service project?

5. Who will be involved in the planning of this service project (ages, demographics – be specific)?

6. Describe the community need your project addresses:

7. Describe your project plan and how it supports Montanans to be Winter Ready:

8. Describe how your project will be inclusive (ages, demographics – be specific):

9. Identify the anticipated total number of volunteers who will participate in your project:

Disadvantaged children and youth	
College students	
Veterans	
Baby Boomers, 55+	
Tribal	
Self Disclosed Individuals with Disabilities	
Other - Please List	
Other - Please List	

10. How will you recruit volunteers for this project?

11. Will your project engage persons not normally asked to serve (please explain)?

12. Describe how you will track numbers of volunteers and volunteer service hours?

13. What supplies or resources are necessary to complete this project?

14. Describe the expected end result of your project:

15. Describe how you will know your project was a success:

16. Will your project collaborate with another organization or partner? ☐ Yes ☐ No
If yes, identify the partner and describe the partner role in the project:

C. Detailed Budget Summary (Be as detailed as possible)

- ✓ Please present the full budget for the project, highlighting other sources of funds, cash, and in kind donations.

ITEM	GRANT FUNDS REQUESTED	ADDITIONAL CASH & IN-KIND ANTICIPATED	SOURCE(S) OF OTHER CASH & IN-KIND	TOTAL FUNDS
<u>Project Materials</u>				
<i>Sub-total</i>				
<u>Transportation for Participants</u>				
<i>Sub-total</i>				
<u>Food, Beverages, and Venue or Material Rentals</u>				
<i>Sub-total</i>				
<i>Total</i>				

- ✓ Budget Narrative. Please describe why the funds requested are necessary for the success of this project. Describe other funding sources and how you plan on partnering with these sources to help build a sustainable project.

Final Project Report

To be completed and returned within one week of the service project.

✓ Project Title

✓ Project Leader

✓ How many people were involved in the planning process?

✓ Who was involved in the planning process?

✓ How many volunteers participated in the Inclusive Service Project and how many hours were served?

	Number of Volunteers	Hours Served
Disadvantaged children and youth		
College students		
Veterans		
Baby Boomers, 55+		
Tribal		
Self Disclosed Individuals with Disabilities		
Other - Please List		
Other - Please List		

✓ Summarize the Inclusive Service Project:

✓ Describe the Inclusive Service Project Results:

✓ Describe how the project helped to create a Winter Ready Montana:

✓ Describe the challenges you faced in completing the Inclusive Service Project:

- ✓ If given the opportunity to run a second project, would anything be done differently? Please explain:

- ✓ What was learned about inclusion?

- ✓ Certification of expended funds (spent only within the allowable use of funds)

- ✓ Certification all project activates/terms listed in the application were met:

- ✓ **Attach video and photo's (Include a media release for every person shown)**

AUTHORIZED AGENT TO SIGN CONTRACTS

NAME & TITLE (print): _____

SIGNATURE & DATE: _____

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